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The Role of Gender in Worry and Efforts to Cope during Stressful Waiting Periods

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Abstract

Waiting for personally significant news is a near-universal experience, but people differ in how they cope with these acute moments of uncertainty. The present study examined whether self-identified men and women differ reliably in how they experience and cope with uncertain waiting periods, given societal pressures toward (for men) or against (for women) emotional experiences that may be relevant in these moments. Across 20 U.S. studies in field and laboratory settings (total $n = 4,714$), we examined gender differences in worry and use of coping strategies during various waiting periods. We then explored whether gender moderated links between worry and use of coping strategies to determine whether gender meaningfully shapes the coping process or if worriers require a larger toolbox of coping strategies, regardless of their gender. Mini meta-analyses across our studies confirmed that women reported greater worry and greater use of coping strategies than did men. However, the relationships between gender and coping largely disappeared after controlling for worry, and gender did not consistently or strongly moderate the link between worry and coping. These findings suggest that despite apparent gender differences in the experience of stressful uncertainty, worry is a far more potent predictor of coping than is gender.

Keywords: gender; waiting; worry; uncertainty; coping

The Role of Gender in Worry and Efforts to Cope during Stressful Waiting Periods

Among the countless well-trodden stereotypes of mothers and fathers, a particularly common one is that mothers are worriers. Imagine the parents of a teenager who stays out far past curfew. In the typical familial script (and in the experience of the authors), the mother lays awake fretting until her child returns home safe and sound, whereas the father snores beside her with complete confidence that all is well. In fact, research supports this familiar portrait of parenthood. On average, stressors loom larger for women than for men (Gutteling & Wiegman, 1993; Tamres, Janicki, & Helgeson, 2002), and women engage in coping behaviors more so than do men (Jordan & Revenson, 1999). These patterns emerge across various types of stressors; however, they may be particularly profound in moments of uncertainty when anxiety, and worry specifically, is the dominant emotional experience (Boivin & Lancaster, 2010; Sweeny & Falkenstein, 2015). In the present paper, we present the results from 20 studies examining the role of gender in experiences across a variety of stressful waiting periods, including the wait for academic, professional, social, and political news. Specifically, we compared levels of worry and patterns in the use of coping strategies among nearly 5,000 self-identified men and women awaiting personally important news and examined whether gender moderates links between worry and coping processes in these moments.

Coping with Waiting

Despite stereotypes to the contrary, men and women are far more similar than they are different (Hyde, 2005). However, a large body of evidence points to reliable gender differences in reactions to threatening and stressful experiences. Specifically, research on stress and coping finds that women tend to engage more in emotion-focused coping strategies than do men (Brougham, Zail, Mendoza, & Miller, 2009; Matud, 2004; Ptacek, Smith, & Dodge, 1994;

Sigmon, Stanton, & Snyder, 1995). Emotion-focused coping, as compared to problem-focused coping, entails addressing the distress associated with a challenging life event or experience rather than attempting to alter or address the event itself (e.g., Folkman & Lazarus, 1980; Folkman & Moskowitz, 2004). Women's greater tendency to employ emotion-focused strategies to cope with stress has been demonstrated quite broadly, including in studies addressing daily stressors in the general population (Matud, 2004) and stress among college (Brougham et al., 2009; Eaton & Bradley, 2008; Guskowska, Zagórska-Pachuka, Kuk, & Skwarek, 2016; Stanton, Kirk, Cameron, & Danoff-Burg, 2000) and high school students (Flannery, Vannucci, & Ohannessian, 2018). A meta-analysis of 50 studies addressing gender differences in coping concluded that even after controlling for women's general tendency to appraise stressors as more severe, women nonetheless engage more in emotion-focused coping strategies than do men (Tamres et al., 2002).

Waiting periods induce a type of stress that is unique in some ways from other types of stressors. Most notably, the types of waiting periods of interest in our investigation (e.g., the wait for exam or election results) entail a lack of certainty about one's future outcomes combined with a lack of control over those outcomes (Sweeny, 2018). These circumstances call for a unique set of coping strategies, as outlined in the uncertainty navigation model (Sweeny & Cavanaugh, 2012): consequence mitigation, reappraisal, and direct emotion management. The strategy of consequence mitigation aims to minimize ill-effects that may arise if the future brings bad news. Consequence mitigation can aim to reduce either objective consequences of bad news (referred to as preventive action) or psychological consequences (referred to as proactive coping). In both cases, people attempt to get their metaphorical ducks in a row in an effort to prepare for the worst.

Reappraisal during waiting periods comes in three forms: expectation management, preemptive benefit-finding, and distancing. Expectation management entails reappraising the likelihood of future outcomes, either by embracing pessimism and bracing for the worst or by embracing hope and optimism. Preemptive benefit-finding entails reappraising the negativity of a bad outcome by seeking silver linings before bad news has arrived, and distancing entails reappraising the implications of bad news by preemptively downplaying its importance or undermining its source. Finally, direct emotion management strategies bypass the psychological gymnastics of consequence mitigation and reappraisal and instead attempt to reduce anxiety in more direct ways. Direct emotion management comes in two forms: distraction from thoughts about the uncertain outcome and suppression of anxious feelings, both internally and as expressed to others.

With the arguable exception of preventive action, all coping strategies that people employ during waiting periods are largely emotion-focused. Because people do not have control over their outcome as they await news of their fate, the opportunity for problem-focused coping is naturally limited during these acute moments of uncertainty. Waiting periods are characterized by a sense of paralysis, which people must simply endure until the desired information arrives and the path ahead becomes clear. Thus, women's tendency to engage more in emotion-focused coping than men do may be particularly pertinent in these periods of stressful uncertainty.

The Role of Worry

Despite a consistent pattern of findings with regard to gender and coping, the source of the gender difference in coping remains unclear. Perhaps the most common supposition is that women engage in more emotion-focused coping than men because they are more likely to experience negative emotions than are men. Although considerable evidence debunks the broad

claim that women are more “emotional” in a broad sense (Brody & Hall, 2008; Kring & Gordon, 1998), women particularly seem to be more anxious and fearful than men on average (see McLean & Anderson, 2009, for a review). This difference manifests in higher rates of anxiety disorders among women (Bruce et al., 2005; Kessler, Sonnega, Bromet, Hughes, & Nelson, 1995), a greater tendency toward rumination (Johnson & Whisman, 2013), and, most relevant to the current investigation, a greater tendency toward worry (Dugas, Freeston, & Ladouceur, 1997; Dugas, Gosselin, & Ladouceur, 2001; McCann, Stewin, & Short, 1991; Robichaud, Dugas, & Conway, 2003; Zlomke & Hahn, 2010).

Although evolutionary and genetic influences may be relevant to this gender difference (see McLean & Anderson, 2009), we focus here on the role of socialization. From a young age, women more so than men are exposed to the message, however subtle, that experiencing and expressing certain emotions is consistent with their gender identity. For example, one study revealed that fathers were more attentive to their preschool-age daughters, compared to their sons, when their children expressed sadness and anxiety—and moreover, this attentiveness predicted children’s tendency to express those emotions up to 2 years later (Chaplin, Cole, & Zahn-Waxler, 2005). In fact, adults perceive fear-relevant emotions (e.g., anxiety, worry) as considerably more stereotype-consistent for women than for men (Plant, Hyde, Keltner, & Devine, 2000; Stavosky & Borkovec, 1987). Gender role theory (Bem, 1981; see also Grossman & Wood, 1993) posits that parents and other influential figures steer children toward traits and behaviors that are consistent with stereotypic beliefs about their gender and, therefore, that expressions of fear, anxiety, and worry are reinforced more in girls than in boys (McLean & Anderson, 2009; Robichaud et al., 2003).

Thus, substantial evidence points to a reliable and robust gender difference in the

tendency to cope with stress via emotion-focused strategies, and both theorizing and empirical evidence point to negative emotionality (particularly with regard to fear-based emotions) as a potential explanation for this difference. We therefore hypothesized that women would both express greater worry (Hypothesis 1a) and engage in greater emotion-focused coping (Hypothesis 1b) in our studies. In the current investigation, we test these links in a common and uniquely stressful context: the wait for personally significant news.

Gender researchers have compellingly argued that the study of gender differences has moved beyond the simple task of documenting such differences and into questions of when they are most and least likely to arise (Brody & Hall, 2008). Thus, the goals of the current paper are twofold. First, we provide a strong test of gender differences in stress and coping processes in a context that provokes nearly everyone into a state of anxious anticipation. Studies of emotions and coping during waiting periods have documented high levels of anxiety, surpassing even the anxiety of receiving highly consequential bad news (e.g., failing the bar exam; Sweeny & Falkenstein, 2015). During these acute moments of uncertainty, many coping strategies do little to alleviate worry (defined in these studies as a combination of anxiety and persistent, repetitive thoughts—distinct from the past-focused repetitive thoughts characteristic of rumination; Sweeny & Dooley, 2017), in some cases even backfiring and exacerbating distress (Sweeny, Reynolds, Falkenstein, Andrews, & Dooley, 2016).

Second, given that waiting reliably rattles even the most upbeat, optimistic individuals (Sweeny & Falkenstein, 2015), we went beyond testing simple gender differences to examine the role of gender in the link between worry and coping in these acute moments of uncertainty. Despite the finding that many coping strategies are ineffective, as we just noted, previous studies of stressful waiting periods have found that people who worry more tend to engage in most

uncertainty-oriented coping strategies to a greater extent (Sweeny & Andrews, 2014; Sweeny et al., 2016). Thus, we anticipated that although socialization processes might lead women to report somewhat greater worry in these moments, both men and women who worried about their uncertain future would report greater efforts to cope with the wait. That is, we tested whether gender moderated the association between worry and coping, hypothesizing that gender would not moderate this link (Prediction 2).

Overview and Approach

Data available from our lab provides the opportunity to examine the role of gender in waiting experiences across 20 studies. We generated this set of studies by examining all studies conducted in our lab on the broad topic of waiting experiences and by including any study that documented participants' self-reported gender and that had a measure of worry and at least one measure of a relevant coping strategy. Given the challenges of presenting such a large number of studies in full methodological detail while maintaining readability, we take an unorthodox approach to our presentation of these studies. In the following, we briefly summarize key procedural details for each study and present descriptions of the measures that appear across studies, noting variations in these measures where relevant. We then focus on the results of “mini” meta-analyses (i.e., meta-analysis of one's own, novel studies; see Goh, Hall, & Rosenthal, 2016, for advantages of conducting mini meta-analyses across one's own studies) that summarize the effects across studies. (Full methodological details are available in our extensive [online supplement](#).)

Method

Procedures

Our investigation includes ten field studies and ten lab studies, all of which were

conducted in the United States. Studies 1–4 (total $n = 486$) examined the experiences of law graduates awaiting their results on the California bar exam between 2011 and 2016. Participants in these studies completed a questionnaire prior to the exam and then a series of questionnaires (between 4 and 8 questionnaires, depending on the study) during the 4-month wait for exam results. Relevant measures appeared in all waiting questionnaires, and analyses of worry, outcome predictions, and use of coping strategies average across these questionnaires. Study 5 ($n = 148$) examined the experiences of doctoral students on the academic job market. As part of a larger longitudinal study, participants completed relevant measures in a baseline survey in October of the academic year in which they sought employment; analyses focus on that measurement point.

Study 6 ($n = 669$) examined experiences of U.S. voters in the 2 months prior to the 2016 presidential election. Each week, we recruited 50 self-identified supporters of Donald Trump and 50 supporters of Hillary Clinton to complete a questionnaire about their feelings of uncertainty and use of coping strategies, among other measures not pertinent to the present inquiry. Study 7 ($n = 374$) similarly examined experiences of U.S. voters, this time in the days prior to the 2018 midterm election. We recruited approximately equal numbers of participants who preferred that the Republican Party retain the U.S. House of Representatives following the election ($n = 193$) and who preferred that the Democratic Party take control of the House ($n = 183$). Participants completed a one-time questionnaire of their feelings of uncertainty and use of coping strategies regarding the competition for control of the U.S. House of Representatives.

Studies 8 and 9 examined the experiences of undergraduate students awaiting a midterm grade (Study 8; $n = 137$) and a grade on an APA-style empirical paper (Study 9; $n = 66$). Participants in both studies completed a baseline questionnaire prior to the exam or submission

of the paper and then completed several questionnaires while they awaited their grade. Analyses averaged across these waiting questionnaires. Study 10 ($n = 128$) examined the experiences of researchers awaiting a manuscript decision. Participants were recruited via professional organizations' listservs to complete a single questionnaire about a manuscript they currently had under review.

Turning to the lab studies (all using the psychology subject pool at the authors' university), Studies 11–13 (total $n = 631$) examined the experiences of participants awaiting their score on what was described as an intelligence test. Study 14 ($n = 399$) examined participants' experiences awaiting evaluations from peers (how likeable, trustworthy, interesting, etc. they were) with whom they interacted earlier in the study session, and Study 15 ($n = 214$) examined participants' experiences awaiting feedback from graduate students on their intelligence and social skills as depicted in a video they recorded during the study session. Studies 16–20 (total $n = 1,462$) examined participants' experiences awaiting feedback about their physical attractiveness from peers who were ostensibly participating in the study in other locations on campus, based on a photograph they took earlier in the study session. In only one of these studies did participants receive the anticipated (and manipulated) feedback, but that portion of the study is not pertinent to this paper. All lab studies included at least one experimental manipulation not pertinent to the present inquiry (see the [online supplement](#) for details), and all studies were reviewed and approved by the IRB at the University of California, Riverside.

Worry

Worry was operationalized as a combination of anxiety and repetitive, persistent thoughts about the anticipated outcome (see Sweeny & Dooley, 2017) and assessed with three items: "I am worried about [outcome]," "I feel anxious every time I think about [outcome]," and "I can't

seem to stop thinking about [outcome].” Worry was assessed in all 20 studies (average Cronbach’s $\alpha = .85$, range = .73–.91).

Coping Strategies

Consequence mitigation. Measures of preventive action were included in seven studies, and measures of proactive coping were included in ten studies. Participants in Studies 2–8 completed a single-item measure of preventive action (e.g., “How much effort have you put toward trying to minimize the problems that would occur if [negative outcome]?”), and participants in Studies 2–8, 11, 12, and 20 completed a single-item measure of proactive coping (e.g., “How much time have you spent thinking about how you’ll cope if [negative outcome]?”).

Reappraisal. Regarding expectation management, participants in all studies completed a two-item measure of bracing for the worst (“I am bracing for the worst when it comes to [outcome]” and “I want to make sure I keep my expectations low when it comes to [outcome]”; average $r = .64$, range = .46–.73), and participants in all but three studies (Studies 13, 15, and 17) completed a two-item measure of hope and optimism (“I’m trying to be optimistic about [outcome]” and “I’m hoping for the best when it comes to [outcome]”; average $r = .57$, range = .44–.69).

Preemptive benefit-finding was assessed in all field studies (Studies 1–10) and in five lab studies (Studies 11, 12, 14, 16, and 20). Measures varied somewhat between studies. The most common measure was three items (8 studies: “It might be for the best if [negative outcome],” “I feel like I would grow as a person if [negative outcome],” and “I feel I’ll learn something from the experience if [negative outcome]”; average Cronbach’s $\alpha = .77$, range = .65–.86). Other studies used a subset of these items, and some added the more explicit item: “I have been trying to focus on good things that might come from [negative outcome].”

Distancing was assessed in the same studies as was preemptive benefit-finding, with the exception of Studies 6, 7, and 10. Measures again varied somewhat across studies, but all measures included between three to five statements regarding the validity of the target evaluation or outcome (e.g., “The bar exam is not a good indicator of my ability to practice law,” “Attractiveness is a matter of opinion,” or “This test is a valid measure of intelligence”; average Cronbach’s $\alpha = .61$, range = .18–.86). Although the internal reliability for the measure of distancing was quite low in some cases, the measure captures several distinct facets of distancing, which combine to create a coherent measure of the construct.

Direct emotion management. Distraction efforts were assessed in 14 studies, in all cases except one with a single item (“I’ve been trying to distract myself from thinking about [outcome]”; Study 4 used four items, Cronbach’s $\alpha = .83$). Suppression efforts were assessed in 13 studies, with two items (“I’ve been trying to stop myself from thinking about [outcome]” and “I’ve been trying to hide my feelings about [outcome]”; average $r = .73$, range = .53–.80; two studies used four items, α s = .81 and .93).

Results

Initial analyses proceeded in three stages. First, to test Hypotheses 1a and 1b, we conducted independent samples *t*-tests comparing men and women on each dependent variable in each study. Effect size *rs* for those analyses appear in Tables 1 (or the field studies) and 2 (for the lab studies), along with the mini meta-analysis of these effects in Table 3. We then ran simple correlations between worry and coping to establish the link observed in previous studies of waiting, such that people who worry more also engage in coping to a greater extent. Table 4 presents average correlations between worry and coping across studies. (Study-specific correlations are available in the [online supplement](#).) All confidence intervals did not include

zero, indicating that all correlations were significant ($p < .05$).

Finally, to test Prediction 2, we ran multiple regression analyses predicting each coping strategy from worry (centered), gender ($-0.5 = \text{male}$, $+0.5 = \text{female}$), and their interaction. Main effects from these models are available in the [online supplement](#), and the interaction effects for each study are presented in Tables 5 and 6, with a mini meta-analysis of these effects in Table 7. For each mini meta-analysis, we first conducted them separately for field and lab studies, then across all 20 studies.

Gender Comparisons

Consistent with Hypothesis 1a, women reported reliably greater worry across studies (see Tables 1–3). Our analyses also supported the hypothesis that women would report engaging in nearly all coping strategies to a greater extent than men would, consistent with Hypothesis 1b, although preventive action did not show a gender difference and the preemptive benefit-finding fell short of statistical significance in the mini meta-analysis. Given the notable differences between field studies (which addressed real-world waiting periods using online surveys) and lab studies (which addressed contrived waiting periods using in-person surveys), we examined these gender differences separately by type of study (see Table 3's top two rows). Findings were generally consistent between field and lab studies, with two notable exceptions in which the confidence intervals for each type of study were non-overlapping. Specifically, the effect of gender on bracing was considerably stronger in lab studies than in field studies, and the effect of gender on preemptive benefit-finding was driven entirely by lab studies. (Note that no lab study included a measure of preventive action.)

Moderation of the Worry-Coping Link

We next turn to the question of whether gender moderated the link between worry and

coping. First, note that worry was consistently correlated with each of the coping strategies when averaging across studies (see Table 4). When examining gender's moderating role in this link (see Tables 5–7; see the [online supplement](#) for main effects in the regression analyses), the pattern of results was inconsistent across coping strategies, and overall the interaction between gender and worry had weak to near-zero effects on coping, consistent with Prediction 2.

Focusing on the mini meta-analytic effects in Table 7 (see the bottom row), the association between worry and coping was slightly stronger for men than women when it came to bracing, preemptive benefit-finding, and preventive action. In no case was the association stronger among women than men.

We again examined these effects separately in field and lab studies (see Table 7's top two rows). The pattern of results was generally quite similar between these types of studies, although the moderation effects for preemptive benefit-finding and preventive action were driven by field studies. In addition, proactive coping showed a reverse effect in lab studies, such that the association between worry and proactive coping was stronger among women than among men in those three studies.

Secondary Analyses

Although not a primary research question, Tables 2s and 3s (see the [online supplement](#)) also reveal that associations between gender and coping largely disappeared after controlling for worry. Of 109 possible effects of gender on coping, in only 19 cases was the main effect of gender statistically significant (i.e., the confidence interval did not contain zero) after controlling for worry and the interaction between gender and worry. Of these 19 remaining main effects, in seven cases the effect was such that men reported more coping than did women. In stark contrast, 78 of the main effects of worry were significant in these models, such that participants who

reported greater worry also reported greater coping (26 effects were nonsignificant; 5 were in the opposite direction).

Finally, as a brief note about within-gender variability, we conducted secondary analyses to compare variability within male and female participants in five of our studies (Studies 4, 6, 12, 14, and 20), selected to provide a range of contexts (bar exam, presidential election, IQ test, social feedback, attractiveness feedback) and with relatively high power (total $n = 2,130$). In no case was a test for equality of variances between male and female participants statistically significant for worry (average $F = 1.11$, average $p = .53$), and the average standard deviations in these studies were nearly identical across groups ($SD_{men} = 1.40$, $SD_{women} = 1.46$). Thus, within gender, we observed considerable variability in worry, and this variability was equivalent between men and women.

Discussion

The goal of our endeavor was twofold: (a) to examine gender differences in worry and coping during periods of acute uncertainty and (b) to test whether gender moderated the well-established links between worry and coping. Our hypotheses were in part guided by evidence of differential socialization in men's and women's emotional expression, particularly with regard to fear-based emotions like worry and emotion-focused coping. We brought to bear a large set of studies across various domains to ensure the reliability of our findings.

Supporting Hypotheses 1a and 1b, women suffered particularly intense worry across studies, and women more readily engaged in a broad set of coping strategies that are largely emotion-focused in nature. That is, we found evidence for broad gender differences in the experience of stressful uncertainty. Of course, our findings relied on self-report measures across the board, leaving open the possibility that women simply felt more comfortable reporting on

their worry and coping efforts than did men. However, two points provide some reassurances that our findings reflect more than self-presentational effects. First, previous work has carefully delineated between emotional experience and expression, and those studies confirm that women *both* express and experience fear-based emotions (including worry) more so than do men (Brody & Hall, 2008). Second, it is difficult to imagine why men would be reluctant to report that they, for example, were embracing hope and optimism or planning for the worst. In fact, women consistently reported greater suppression efforts compared to men, despite considerable evidence pointing to men's greater emotion-suppressive tendencies (Gross & John, 2003). Thus, it seems that in the context of uncertain waiting periods, women's tendency toward emotion-focused coping dominated differences that might arise in less acute contexts.

Although the gender differences we identified were consistent with our expectations and with previous work on differential socialization of boys and girls, we went beyond simple gender differences to test a deeper question about the processes underlying stressful uncertainty: When women and men worry equally about an uncertain outcome, do they meet those worries with equal efforts to cope? In short, our findings suggest that the answer is yes, thus supporting Prediction 2. That is, gender did not consistently moderate the link between worry and efforts to cope with that worry. In the cases of bracing for the worst, preemptive benefit-finding, and preventive action, men showed a somewhat stronger link between worry and use of these coping strategies; however, the difference in strength (i.e., the interaction effect) in even these cases was quite small. Furthermore, in regression models that included gender, worry, and their interaction as predictors of coping, worry was a far more robust predictor of coping than was gender. Taken together, our findings suggest that although women may be more likely to get caught on the seesaw of worry and concomitant efforts to cope, within-gender variability in worry is a more

potent predictor of patterns of coping during stressful waiting periods. In this way, our multi-study synthesis goes beyond simply documenting gender differences to identify key consequences of these differences when they arise.

Limitations and Future Research Directions

The current investigation marshaled a bevy of evidence from nearly 4,000 U.S. participants in the highest-powered tests, with nearly equal representation of men and women, and a diverse range of populations, methodologies, and contexts. The studies varied in a number of ways, including the domain of uncertainty (e.g., professional, social, political), the importance of the outcome (e.g., bar exam results vs. course exam grades), the study design (longitudinal, cross-sectional, or experimental), and the nature of the sample (e.g., undergraduates, doctoral and law students, U.S. voters). We further examined our research questions across a large set of both field and lab studies, and very few findings differed substantially between them. Thus, we made every effort to ensure that our findings are robust and generalizable.

Nonetheless, our investigation was limited in several notable ways. First, although our findings were generally consistent with our predictions, they varied considerably in the size of the effects. Regarding broad gender differences, the meta-analytic difference for worry was the largest (effect size $r = .18$), whereas differences in men's and women's use of coping strategies ranged from quite small (smallest effect size $r = .02$) to moderate (largest effect size $r = .11$). Associations between worry and coping also ranged in magnitude, such that the strongest associations were quite large ($r_s \geq .50$ for bracing, distraction, and suppression) and the smallest were small-to-moderate (r_s of .09 and .11 for preemptive benefit-finding and hope/optimism, respectively). Finally, the interaction effects between gender and worry on coping were negligible across the board, although they ranged from essentially zero to small yet statistically

significant.

Second, due to the large number of studies (20) and the relatively large set of coping strategies examined here (8), the total number of statistical tests was also quite large. We did not use any correction to reduce alpha inflation, opting instead to focus on the results of mini meta-analyses rather than individual *t*-tests, correlations, or regression coefficients. This approach should be quite robust to variations in effect sizes and statistical significance due to chance alone. That is, we do not interpret any particular effect among the large number of study and strategy-specific tests; instead, we focus entirely on the synthesized findings of mini meta-analyses, thus reducing the influence of any particular effect (which in itself might be spurious).

Finally, the detailed methods presented for each study in the [online supplement](#) reveal that the internal reliability of some coping measures was quite low in some studies. This problem is particularly notable for measures of distancing in the five lab studies that included such a measure, with an average Cronbach's alpha of only .37 for those studies. In contrast, the measures of distancing had strong internal reliability in field studies, with an average Cronbach's alpha of .78 in those seven studies. Given that measures of distancing (i.e., downplaying the personal implications of bad news) varied only slightly in wording between studies, it is unclear why we measured this construct more reliably in the field than in the lab. However, this measurement concern suggests that the findings for distancing should be interpreted with caution.

Despite these limitations, our investigation provides a strong test of our predictions across a large number of studies and participants. Future research can thus move forward and test deeper questions about the role (or lack thereof) of gender in the context of stressful waiting periods, as well as in coping with stress more broadly. One clear next step is to move beyond

self-report measures of worry and coping to reduce the influence of impression management and social desirability, both of which may reflect differential gender socialization beyond any “true” gender differences in emotional experience.

Second, future research can aim to better understand the gender differences we revealed. We proposed at the outset of our paper that differential socialization is likely responsible for any gender differences in worry and coping that we might find. However, our studies were not designed to test the role of socialization. Studies that explicitly test the role of socialization (for example, by examining whether greater adherence to traditional gender roles exacerbates gender differences) are needed to provide evidence for the underlying process behind apparent gender differences in coping with uncertainty.

Finally, although we found no consistent evidence for gender differences in the links between worry and coping, future studies should tackle gender’s role in other well-established waiting phenomena. For example, numerous studies have found that worry and coping tend to be most intense at the beginning and end of waiting periods (Sweeny & Andrews, 2014)—Is that equally true for men and women? Similarly, studies have identified several personality traits that are closely tied to difficulties during waiting periods, including dispositional pessimism and intolerance of uncertainty—Are these traits equally problematic for men and women? Such studies would go beyond identifying simple gender differences to understand how gender might dynamically interact with environmental and intrapersonal factors to determine stress and coping outcomes.

Practice Implications

An additional direction for future research relevant to the current findings is to develop and test interventions that help people to wait well (Sweeny et al., 2016). By identifying

“preexisting conditions” in various populations, these interventions can be geared appropriately toward groups with particular vulnerabilities. This strategy has promise, as suggested in a study of recent law graduates who were awaiting bar exam results and were randomly assigned to engage in mindfulness meditation or a control meditation activity (Sweeny & Howell, 2017). Individuals who were lower in dispositional optimism and higher in intolerance of uncertainty (traits reliably associated with a more difficult waiting experience) benefited most from the mindfulness intervention, suggesting that interventions can be fruitfully targeted to those who most need them.

Of course, our findings revealed that high-level worriers, although more likely to be women than men, cope similarly with uncertainty. Thus, a comprehensive strategy, useful to both men and women, would be to highlight the benefits of different strategies and experiences during the wait for uncertain news. Worry can be quite advantageous if its motivating properties are effectively harnessed (Sweeny & Dooley, 2017), and people likely vary in how effective they find different coping strategies to be. An ideal approach to improving waiting experiences would be one that avoids stereotyping by gender and instead focuses on individuals’ unique experiences of worry and coping to harness each person’s strengths (see Shields, 2013, for more on this approach). Our investigation provides a robust foundation on which such interventions can be built.

Conclusions

In *The Cobbler of Preston*, Christopher Bullock (1716) famously noted that “’tis impossible to be sure of any thing but Death and Taxes.” With due respect to Mr. Bullock, a third experience is nearly as assured: waiting for uncertain news. Regardless of age, nationality, profession, social class, and, pertinent to the current investigation, gender, everyone must wait

for important news at various points in their life. Our findings suggest that although women and men may differ somewhat in their likelihood of facing high levels of worry and extensive efforts to cope during these stressful periods of uncertainty, they are more similar than they are different. When worry arises, as it does for most people during the most stressful of waiting periods (e.g., awaiting a biopsy result or the announcement of layoffs), men and women are equally likely to rifle their coping toolbox in an effort to confront the frustrating combination of uncertainty and a lack of control that waiting entails.

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Table 1

Comparisons between Men and Women on Waiting Experiences—Field Studies

									Preemptive			
	Context	<i>n</i>	% female	Worry <i>r</i> (<i>p</i>)	Bracing <i>r</i> (<i>p</i>)	Hope/ optimism <i>r</i> (<i>p</i>)	Distraction efforts <i>r</i> (<i>p</i>)	Suppression efforts <i>r</i> (<i>p</i>)	benefit- finding <i>r</i> (<i>p</i>)	Distancing <i>r</i> (<i>p</i>)	Proactive coping <i>r</i> (<i>p</i>)	Preventive action <i>r</i> (<i>p</i>)
Study 1	Bar exam result	50	52%	.34 (.02)	.08 (.56)	.09 (.52)	.40 (.004)	--	.07 (.65)	.15 (.27)	--	--
Study 2	Bar exam result	214	61%	.31 (<.001)	.22 (.001)	.01 (.88)	.31 (<.001)	.29 (<.001)	.03 (.69)	.08 (.22)	.15 (<.001)	.22 (.03)
Study 3	Bar exam result	90	56%	.24 (.03)	.08 (.45)	-.07 (.50)	.22 (.04)	.24 (.02)	.07 (.52)	.15 (.17)	.11 (.32)	.14 (.21)
Study 4	Bar exam result	132	61%	.28 (<.001)	.28 (.001)	-.02 (.82)	.24 (.005)	.29 (.001)	.01 (.93)	.18 (.03)	.19 (.03)	.23 (.009)
Study 5	Academic job market	148	57%	.16 (.05)	-.01 (.94)	-.06 (.46)	-.01 (.95)	-.02 (.78)	-.20 (.01)	.12 (.14)	.08 (.31)	.14 (.10)
Study 6	2016 presidential election	669	44%	.18 (<.001)	-.05 (.21)	.13 (<.001)	.03 (.38)	.01 (.81)	-.03 (.49)	--	.08 (.04)	-.05 (.17)
Study 7	2018 midterm election	374	45%	.07 (.17)	-.06 (.24)	.09 (.09)	-.05 (.36)	-.08 (.14)	-.05 (.32)	--	-.02 (.72)	-.11 (.04)
Study 8	Midterm grade	137	68%	.30 (<.001)	.26 (.002)	.03 (.72)	.24 (.006)	.25 (.004)	.11 (.22)	-.06 (.47)	.02 (.81)	.08 (.37)
Study 9	Paper grade	66	76%	.19 (.12)	.25 (.04)	-.24 (.06)	--	--	-.04 (.72)	-.03 (.91)	--	--
Study 10	Manuscript submission	129	52%	.10 (.24)	.15 (.09)	-.03 (.76)	.03 (.77)	.07 (.40)	.06 (.47)	--	--	--

Note. *r* effect sizes for independent *t*-tests between self-identified men and women, with *p*-values below each in parentheses. Positive effect sizes indicate that the mean for women was higher; negative effect sizes indicate that the mean for men was higher.

Table 2

Comparisons between Men and Women on Waiting Experiences—Lab Studies

	Context	<i>n</i>	% female	Worry <i>r</i> (<i>p</i>)	Bracing <i>r</i> (<i>p</i>)	Hope/ optimism <i>r</i> (<i>p</i>)	Distraction efforts <i>r</i> (<i>p</i>)	Suppression efforts <i>r</i> (<i>p</i>)	Preemptive benefit- finding <i>r</i> (<i>p</i>)	Distancing <i>r</i> (<i>p</i>)	Proactive coping <i>r</i> (<i>p</i>)	Preventive action <i>r</i> (<i>p</i>)
Study 11	Pseudo-IQ score	89	64%	.12 (.27)	.26 (.01)	.41 (<.001)	.33 (.002)	.26 (.02)	.13 (.23)	-.15 (.17)	.13 (.21)	--
Study 12	Pseudo-IQ score	330	67%	.23 (<.001)	.16 (.003)	.19 (<.001)	.12 (.03)	.12 (.04)	.16 (.003)	.15 (.007)	-.01 (.86)	--
Study 13	Pseudo-IQ score	212	58%	.11 (.10)	.19 (.004)	--	--	--	--	--	--	--
Study 14	Social feedback	399	66%	.11 (.04)	.07 (.18)	.09 (.09)	.09 (.08)	.08 (.10)	.10 (.04)	-.02 (.10)	--	--
Study 15	Social feedback	214	56%	.10 (.15)	.07 (.31)	--	--	--	--	--	--	--
Study 16	Photo ratings	318	68%	.16 (.002)	.08 (.09)	.07 (.21)	.12 (.02)	.09 (.08)	.03 (.59)	.12 (.03)	--	--
Study 17	Photo ratings	140	59%	.19 (.03)	.16 (.06)	--	--	--	--	--	--	--
Study 18	Photo ratings	229	65%	.26 (<.001)	.32 (<.001)	.05 (.48)	--	--	--	--	--	--
Study 19	Photo ratings	196	60%	.12 (.08)	.19 (.009)	-.11 (.13)	--	--	--	--	--	--
Study 20	Photo ratings	579	65%	.21 (<.001)	.17 (<.001)	-.08 (.06)	.09 (.04)	.12 (.003)	.01 (.73)	.12 (.005)	.21 (<.001)	--

Note. *r* effect sizes for independent *t*-tests between self-identified men and women, with *p*-values below each in parentheses. Positive effect sizes indicate that the mean for women was higher; negative effect sizes indicate that the mean for men was higher.

Table 3

Meta-Analysis of Gender Differences Across Studies

	Worry <i>r</i> [95% <i>CI</i>]	Bracing <i>r</i> [95% <i>CI</i>]	Hope/ optimism <i>r</i> [95% <i>CI</i>]	Distraction efforts <i>r</i> [95% <i>CI</i>]	Suppression efforts <i>r</i> [95% <i>CI</i>]	Preemptive benefit-finding <i>r</i> [95% <i>CI</i>]	Distancing <i>r</i> [95% <i>CI</i>]	Proactive coping <i>r</i> [95% <i>CI</i>]	Preventive action <i>r</i> [95% <i>CI</i>]
Field	.19 [.15, .23] <i>n</i> = 2,009	.05 [.01, .10] <i>n</i> = 2,009	.05 [.004, .09] <i>n</i> = 2,009	.09 [.04, .13] <i>n</i> = 1,943	.08 [.03, .12] <i>n</i> = 1,764	-.02 [-.06, .03] <i>n</i> = 2,009	.08 [.01, .15] <i>n</i> = 837	.07 [.03, .12] <i>n</i> = 1,764	.03 [-.02, .07] <i>n</i> = 1,764
Lab	.17 [.13, .21] <i>n</i> = 2,706	.15 [.12, .19] <i>n</i> = 2,706	.05 [.006, .09] <i>n</i> = 2,140	.11 [.07, .16] <i>n</i> = 1,715	.11 [.07, .16] <i>n</i> = 1,715	.07 [.02, .12] <i>n</i> = 1,715	.08 [.03, .13] <i>n</i> = 1,715	.13 [.07, .19] <i>n</i> = 998	--
All	.18 [.15, .21] <i>n</i> = 4,715	.11 [.08, .14] <i>n</i> = 4,715	.05 [.02, .08] <i>n</i> = 4,149	.10 [.07, .13] <i>n</i> = 3,658	.09 [.06, .12] <i>n</i> = 3,608	.02 [-.008, .06] <i>n</i> = 3,724	.08 [.04, .12] <i>n</i> = 2,552	.09 [.06, .13] <i>n</i> = 2,762	.03 [-.02, .07] <i>n</i> = 1,764

Note. Overall meta-analytic effects are weighted *r* effect sizes. Positive effect sizes indicate that the mean for women was higher; negative effect sizes indicate that the mean for men was higher.

Table 4

Mini Meta-Analysis of Correlations between Worry and Use of Coping Strategies

	Bracing <i>r</i> [95% CI]	Hope/ optimism <i>r</i> [95% CI]	Distraction efforts <i>r</i> [95% CI]	Suppression efforts <i>r</i> [95% CI]	Preemptive benefit-finding <i>r</i> [95% CI]	Distancing <i>r</i> [95% CI]	Proactive coping <i>r</i> [95% CI]	Preventive action <i>r</i> [95% CI]
Mini meta-analytic correlation with worry <i>n</i> = 4715	.50 [.48, .52]	.11 [.08, .14]	.54 [.51, .56]	.57 [.55, .59]	.09 [.06, .12]	.12 [.08, .16]	.40 [.37, .43]	.21 [.16, .25]

Note. Meta-analytic effects are weighted *r* effect sizes, with 95% confidence intervals in brackets below.

Table 5

Moderation of the Worry-Coping Link by Gender—Field Studies

		Bracing β [95% CI]	Hope/ optimism β [95% CI]	Distraction efforts β [95% CI]	Suppression efforts β [95% CI]	Preemptive benefit-finding β [95% CI]	Distancing β [95% CI]	Proactive coping β [95% CI]	Preventive action β [95% CI]
Study 1	50	-.19 [-.41, .03]	.09 [-.20, .39]	-.05 [-.22, .12]	--	.12 [-.18, .41]	-.08 [-.37, .21]	--	--
Study 2	214	-.02 [-.14, .11]	-.08 [-.22, .05]	-.01 [-.10, .08]	.04 [-.05, .13]	-.15 [-.29, -.02]	.07 [-.07, .21]	-.02 [-.15, .10]	-.03 [-.16, .11]
Study 3	90	-.02 [-.21, .17]	-.20 [-.40, .004]	-.06 [-.21, .08]	.01 [-.12, .14]	.03 [-.19, .24]	.08 [-.13, .30]	-.12 [-.30, .07]	-.18 [-.38, .03]
Study 4	132	-.05 [-.21, .11]	-.01 [-.19, .17]	-.07 [-.23, .09]	-.05 [-.20, .10]	-.16 [-.34, .01]	-.18 [-.34, -.01]	.02 [-.12, .15]	.001 [-.16, .17]
Study 5	148	.02 [-.16, .19]	-.16 [-.33, .01]	-.03 [-.20, .15]	.18 [.01, .35]	.04 [-.13, .21]	-.01 [-.18, .17]	-.18 [-.35, -.02]	-.27 [-.44, -.10]
Study 6	669	.01 [-.06, .08]	.03 [-.05, .10]	.04 [-.03, .11]	.02 [-.05, .09]	-.01 [-.09, .06]	--	.04 [-.02, .11]	-.003 [-.08, .07]
Study 7	374	-.09 [-.18, .01]	.06 [-.04, .16]	-.13 [-.23, -.04]	-.13 [-.22, -.03]	-.14 [-.24, -.04]	--	.01 [-.08, .10]	-.08 [-.17, .02]
Study 8	137	-.20 [-.35, -.03]	.15 [-.04, .34]	.04 [-.07, .16]	.05 [-.07, .16]	-.19 [-.38, -.01]	-.11 [-.29, .07]	-.13 [-.29, .04]	-.12 [-.30, .06]
Study 9	66	-.08 [-.29, .12]	-.14 [-.39, .11]	--	--	-.31 [-.56, -.05]	.07 [-.18, .33]	--	--
Study 10	129	-.17 [-.32, -.01]	-.06 [-.24, .12]	.02 [-.13, .18]	.04 [-.12, .20]	.03 [-.15, .21]	--	--	--

Note. Standardized betas for the interaction between gender (male = -0.5, female = +0.5) and worry predicting each coping strategy, with 95% CI in brackets below each estimate. A negative interaction effect indicates that the relationship is stronger among men; a positive effect indicates that the relationship is stronger among women. For main effects of gender and worry, see the [online supplement](#).

Table 6

Moderation of the Worry-Coping Link by Gender—Lab Studies

		Bracing β [95% CI]	Hope/ optimism β [95% CI]	Distraction efforts β [95% CI]	Suppression efforts β [95% CI]	Preemptive benefit-finding β [95% CI]	Distancing β [95% CI]	Proactive coping β [95% CI]	Preventive action β [95% CI]
Study 11	89	.02 [-.16, .20]	-.08 [-.28, .11]	.12 [-.05, .30]	.16 [.003, .32]	.02 [-.19, .23]	-.28 [-.49, -.07]	.09 [-.10, .28]	--
Study 12	330	-.03 [-.14, .08]	-.06 [-.18, .06]	.01 [-.09, .11]	.04 [-.05, .13]	-.03 [-.15, .09]	.06 [-.07, .18]	.13 [-.03, .29]	--
Study 13	212	-.01 [-.13, .10]	--	--	--	--	--	--	--
Study 14	399	-.09 [-.18, .005]	-.08 [-.19, .02]	.07 [-.02, .15]	.01 [-.07, .09]	-.03 [-.13, .07]	.03 [-.08, .13]	--	--
Study 15	214	-.07 [-.17, .03]	--	--	--	--	--	--	--
Study 16	318	-.11 [-.21, -.003]	-.04 [-.16, .08]	-.03 [-.13, .07]	-.01 [-.11, .08]	.01 [-.11, .14]	-.02 [-.14, .11]	--	--
Study 17	140	-.05 [-.19, .08]	--	--	--	--	--	--	--
Study 18	229	-.09 [-.20, .02]	-.05 [-.20, .09]	--	--	--	--	--	--
Study 19	196	-.02 [-.14, .10]	.03 [-.12, .18]	--	--	--	--	--	--
Study 20	579	.01 [-.07, .08]	.0003 [-.09, .09]	.003 [-.07, .08]	.03 [-.05, .10]	-.04 [-.13, .05]	.05 [-.03, .14]	.11 [.04, .18]	--

Note. Standardized betas for the interaction between gender (male = -0.5, female = +0.5) and worry predicting each coping strategy, with 95% CI in brackets below each estimate. A negative interaction effect indicates that the relationship is stronger among men; a positive effect indicates that the relationship is stronger among women. For main effects of gender and worry, see the [online supplement](#).

Table 7

Mini Meta-Analysis of Moderation Effects

	Bracing	Hope/ optimism	Distraction efforts	Suppression efforts	Preemptive benefit-finding	Distancing	Proactive coping	Preventive action
	Avg. β	Avg. β	Avg. β	Avg. β	Avg. β	Avg. β	Avg. β	Avg. β
	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]
Field	-.05 [-.09, -.006] $n = 2,009$	-.005 [-.05, .04] $n = 2,009$	-.02 [-.06, .03] $n = 1,943$	.003 [-.04, .05] $n = 1,893$	-.07 [-.11, -.03] $n = 2,009$	-.02 [-.09, .05] $n = 837$	-.01 [-.06, .03] $n = 1,764$	-.06 [-.11, -.02] $n = 1,764$
Lab	-.05 [-.08, -.007] $n = 2,706$	-.04 [-.08, .007] $n = 2,140$	.02 [-.03, .07] $n = 1,715$	.03 [-.02, .07] $n = 1,715$	-.02 [-.07, .02] $n = 1,715$	.02 [-.03, .06] $n = 1,715$	.11 [.05, .18] $n = 998$	--
All	-.05 [-.08, -.01] $n = 4,715$	-.02 [-.05, .01] $n = 4,149$	-.001 [-.03, .03] $n = 3,658$	.01 [-.02, .05] $n = 3,608$	-.05 [-.08, -.02] $n = 3,724$	.005 [-.03, .04] $n = 2,552$	.03 [-.005, .17] $n = 2,762$	-.06 [-.11, -.02] $n = 1,764$

Note. Avg. β = average beta. Meta-analytic effects are weighted effect sizes based on β s (treated like r s for meta-analytic calculations; see Bowman, 2012). A negative interaction effect indicates that the relationship is stronger among men; a positive effect indicates that the relationship is stronger among women.

Online supplement for Sweeny, K., Kwan, V., and Falkenstein, A. (2019). The role of gender in worry and efforts to cope during stressful waiting periods. *Sex Roles*. Kate Sweeny, University of California, Riverside. Email: ksweeny@ucr.edu

SUPPLEMENTAL METHODS

Study 1

Participants ($N = 50$; 52% women; $M_{\text{age}} = 27.5$; 82% White, 8% Asian, 6% Black or African-American, 4% other) were law school graduates taking the California bar exam in July 2011. We completed this study with minimal resources, and thus sample size was determined by available funds. After completing a baseline assessment prior to the exam, participants completed questionnaires at four time points throughout the 4-month waiting period before learning their result, and once after learning their result. For the purpose of this article, we will focus on the four questionnaires completed during the waiting period. Full study materials are available at osf.io/v34rk.

The waiting period questionnaires included measures of worry (three items; e.g., “I am worried about my bar exam results”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.84$, $SD = .88$, average $\alpha = .86$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to my bar exam results”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.76$, $SD = .97$, average $r = .70$), hope and optimism (two items; e.g., “I’m trying to be optimistic about my bar exam results”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 4.14$, $SD = .56$, average $r = .44$; one item showed restriction of range at some time points), preemptive benefit-finding (three items; e.g., “I feel like I would grow as a person if I fail the bar exam”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.22$, $SD = .83$, average $\alpha = .74$), distancing (five items; e.g., “The bar exam doesn’t really measure anything important”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 3.19$, $SD = .85$, average $\alpha = .86$), and distraction (“In the last 3 days I’ve been trying to distract

myself from thinking about my bar exam results”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.83$, $SD = .89$). Additional methodological details are included in Sweeny & Andrews (2014).

Study 2

Participants ($N = 230$; 61% women; $M_{\text{Age}} = 27.6$; 67% White, 25% Asian or Pacific Islander, 7% Latinx, 1% Black or African-American) were law school graduates taking the California bar exam in July 2013. We recruited as many participants as possible via an array of recruitment strategies by the point at which we needed to launch the baseline survey. After completing a baseline assessment prior to the exam, participants completed questionnaires at eight time points throughout the 4-month waiting period before learning their result, and once after learning their result. For the purpose of this article, we will focus on the eight questionnaires completed during the waiting period. Full study materials are available at osf.io/d35ap.

The waiting period questionnaires included measures of worry (three items; e.g., “I am worried about my bar exam results”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.79$, $SD = .81$, average $\alpha = .87$), preventive action (“How much effort have you put toward trying to minimize the problems that would occur if you fail the bar exam?”; 1 = *very little effort*, 5 = *a great deal of effort*; $M = 1.81$, $SD = .84$), proactive coping (“How much time did you spend thinking about how you’ll cope if you fail the bar exam?”; $M = 2.18$, $SD = .89$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to my bar exam results”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 3.37$, $SD = 1.00$, average $r = .66$), hope and optimism (two items; e.g., “I’m trying to be optimistic about my bar exam results”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 4.10$, $SD = .56$, average $r = .51$), preemptive benefit-finding (three items; e.g., “I feel like I would grow as a person if I fail the bar exam”; 1 = *strongly disagree*, 5 =

strongly agree; $M = 1.95$, $SD = .80$, average $\alpha = .75$), distancing (five items; e.g., “The bar exam doesn’t really measure anything important”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 3.47$, $SD = .78$, average $\alpha = .85$), distraction (“I’ve been trying to distract myself from thinking about my bar exam results”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.91$, $SD = 1.00$), and suppression (two items; e.g., “I’ve been trying to stop myself from thinking about the bar exam”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.64$, $SD = .87$, average $r = .60$). Additional methodological details are included in Sweeny et al. (2016).

Study 3

Participants ($N = 90$; 56% women; $M_{\text{Age}} = 28.2$; 61% White, 13% Asian or Pacific Islander, 6% Black or African-American, 5% Latinx, 16% other or multiple) were law school graduates taking the California bar exam in July 2014. We aimed for 100 participants given available funds, but ultimately we recruited as many participants as possible via an array of recruitment strategies by the point at which we needed to launch the baseline survey. After completing a baseline assessment prior to the exam, participants completed questionnaires at six time points throughout the 4-month waiting period before learning their result, and once after learning their result. Participants were randomly assigned to an additional manipulation not relevant to this investigation. For the purpose of this article, we will focus on the six questionnaires completed during the waiting period. Full study materials are available at osf.io/6a7sx.

The waiting period questionnaires included measures of worry (three items; e.g., “I am worried about my bar exam results”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.75$, $SD = .86$, average $\alpha = .89$), preventive action (“How much effort have you put toward trying to minimize the problems that would occur if you fail the bar exam?”; 1 = *very little effort*, 5 = *a*

great deal of effort; $M = 1.80$, $SD = .97$), proactive coping (“How much time did you spend thinking about how you’ll cope if you fail the bar exam?”; $M = 1.84$, $SD = .86$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to my bar exam results”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 3.02$, $SD = 1.08$, average $r = .70$), hope and optimism (two items; e.g., “I’m trying to be optimistic about my bar exam results”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 4.25$, $SD = .57$, average $r = .51$), preemptive benefit-finding (two items; e.g., “I feel like I would grow as a person if I fail the bar exam”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.65$, $SD = 1.13$, average $r = .79$), distancing (three items; e.g., “The bar exam doesn’t really measure anything important”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 3.49$, $SD = .85$, average $\alpha = .79$), distraction (“I’ve been trying to distract myself from thinking about my bar exam results”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.89$, $SD = 1.04$), and suppression (two items; e.g., “I’ve been trying to stop myself from thinking about the bar exam”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.69$, $SD = .96$, average $r = .53$). Additional methodological details are included in Sweeny and Howell (2017).

Study 4

Participants ($N = 130$; 61% women; $M_{\text{Age}} = 27.7$; 61% White, 19% Asian or Pacific Islander, 7% Latinx, 2% Black or African-American, 11% other or multiple) were law school graduates taking the California bar exam in July 2016. We aimed for 150 participants given available funds, but ultimately we recruited as many participants as possible via an array of recruitment strategies by the point at which we needed to launch the baseline survey. After completing baseline assessment prior to the exam, participants completed questionnaires at five time points throughout the 4-month waiting period before learning their result, and once after

learning their result. For the purpose of this article, we will focus on the five questionnaires completed during the waiting period. Full study materials are available at osf.io/mpnqt.

The waiting period questionnaires included measures of worry (three items; e.g., “I am worried about my bar exam results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.42$, $SD = 1.24$, average $\alpha = .83$), preventive action (“How much effort have you put toward trying to minimize the problems that would occur if you fail the bar exam?”; 1 = *not at all*, 5 = *a great deal*; $M = 1.72$, $SD = .68$), proactive coping (“How much time did you spend thinking about how you’ll cope if you fail the bar exam?”; 1 = *not at all*, 5 = *a great deal*; $M = 2.29$, $SD = .83$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to my bar exam results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.30$, $SD = 1.50$, average $r = .67$), hope and optimism (two items; e.g., “I’m trying to be optimistic about my bar exam results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 5.97$, $SD = .92$, average $r = .59$), preemptive benefit-finding (three items; e.g., “I feel like I would grow as a person if I fail the bar exam”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.25$, $SD = 1.29$, average $\alpha = .83$), distancing (four items; e.g., “The bar exam doesn’t really measure anything important”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.46$, $SD = 1.13$, average $\alpha = .71$), distraction (four items; “I’ve been trying to distract myself from thinking about my bar exam result”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.26$, $SD = 1.16$, average $\alpha = .83$), and suppression (four items; e.g., “I’ve been trying to stop myself from thinking about the bar exam result”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.22$, $SD = 1.08$, average $\alpha = .82$).

Study 5

Participants ($N = 167$; 57% women; $M_{\text{Age}} = 30.1$; 74% White, 11% Asian or Pacific Islander, 6% Latinx, 2% Black or African-American, 1% Native American, 6% other or

multiple) were PhD candidates currently on the academic job market. We aimed for 200 participants given available funds, but ultimately we recruited as many participants as possible via an array of recruitment strategies by the point at which we needed to launch the baseline survey. For the purpose of our inquiry, we focus on a baseline questionnaire that participants completed in the first two weeks of October. Full study materials are available at osf.io/ek9bu.

The baseline included measures of worry (3 items; e.g., “I am worried about my prospects on the job market”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.64$, $SD = 1.28$, Cronbach’s $\alpha = .73$), preventive action (“How much effort have you put toward trying to minimize the problems that will occur if you do not secure a desirable position this year?”; 1 = *not at all*, 7 = *a great deal of effort*; $M = 3.60$, $SD = 1.27$), proactive coping (“How much time have you put spent thinking about how you’ll cope if you do not secure a desirable position this year?”; 1 = *not at all*, 7 = *a great deal of time*; $M = 3.51$, $SD = 1.22$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to the job market this year”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.77$, $SD = 1.40$, $r = .49$), hope and optimism (two items; e.g., “I’m trying to be optimistic about the job market this year”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 5.63$, $SD = 1.16$, $r = .69$), preemptive benefit-finding (three items; e.g., “I feel like I would grow as a person if I do not secure a desirable position this year”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.18$, $SD = 1.26$, Cronbach’s $\alpha = .76$), distancing (four items; e.g., “Success on the job market doesn’t really indicate anything important”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.09$, $SD = 1.19$, Cronbach’s $\alpha = .75$), distraction (“I’ve been trying to distract myself from thinking about the job market”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.76$, $SD = 1.84$), and suppression (two items; e.g., “I’ve been trying to stop myself from

thinking about the job market”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.52$, $SD = 1.61$, $r = .61$).

Study 6

Participants ($N = 669$; 44% women; $M_{Age} = 34.6$; ethnicity data not available) were Amazon mTurk users in the United States compensated \$1 for their participation. Every week for the seven weeks prior to the 2016 U.S. presidential election, a new group of 50 self-identified Donald Trump supporters and 50 self-identified Hillary Clinton supporters reported on their experiences in anticipation of the election. Participants were also given the option to complete a questionnaire after learning of the election results. Sample size determinations were based on available funds. For the purpose of this article, we will focus on the seven questionnaires completed prior to the election. Full study materials are available at osf.io/7j3ca.

The waiting period questionnaires included measures of worry (three items; e.g., “I am worried about the outcome of the presidential election”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.21$, $SD = 1.55$, $\alpha = .85$), preventive action (“How much effort have you put toward trying to minimize the problems that would occur if your preferred presidential candidate does not get elected?”; 1 = *none at all*, 5 = *a great deal of effort*; $M = 1.74$, $SD = .97$), proactive coping (“In the past week, how much time have you put spent thinking about how you’ll cope if your preferred presidential candidate does not get elected?”; 1 = *no time*, 7 = *a great deal of time*; $M = 2.93$, $SD = 1.72$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to the results of the presidential election”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.28$, $SD = 1.51$, $r = .50$), hope and optimism (two items; e.g., “I’m trying to be optimistic about the outcome of the presidential election”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 5.50$, $SD = 1.18$; $r = .62$), preemptive benefit-finding (“I have been trying to focus on good things that

might come if my preferred presidential candidate does not get elected“; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.79$, $SD = 1.62$), distraction (“I’ve been trying to distract myself from thinking about the outcome of the presidential election”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.13$, $SD = 1.66$), and suppression (four items; e.g., “I’ve been trying to stop myself from thinking about the outcome of the presidential election”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.02$, $SD = 1.52$, $\alpha = .81$).

Study 7

Participants ($N = 374$; 45% women; $M_{\text{Age}} = 38.3$; 76% White, 6% Asian or Pacific Islander, 5% Latinx, 9% Black or African-American, <1% Native American, 5% other or multiple) were Amazon mTurk users in the United States compensated \$1 for their participation. We aimed to recruit 400 participants within two days prior to the 2018 U.S. midterm election, 200 of whom preferred that the Republicans maintain control of the U.S. House of Representatives, and 200 of whom preferred that the Democrats take control of the U.S. House. Sample size determinations were based on available funds. Full study materials are available at osf.io/kt6x7/.

The waiting period questionnaires included measures of worry (three items; e.g., “I am worried about the outcome of the U.S. midterm elections”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.86$, $SD = 1.50$, $\alpha = .87$), preventive action (“In the past week, how much effort have you put toward trying to minimize the problems that would occur if your preferred party does not have control of the U.S. House of Representatives following the election?”; 1 = *none at all*, 7 = *a great deal of effort*; $M = 2.88$, $SD = 1.67$), proactive coping (“In the past week, how much time have you spent thinking about how you will cope if your preferred party does not have control of the U.S. House of Representatives following the election?”; 1 = *no time*, 7 = *a great deal of time*;

$M = 3.07$, $SD = 1.65$), bracing for the worst (two items; e.g., “I’m bracing for the worst when it comes to the results of the U.S. midterm election”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.15$, $SD = 1.50$, $r = .53$), hope and optimism (two items; e.g., “I’m trying to be optimistic about the outcome of the U.S. midterm election”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 5.69$, $SD = 1.02$; $r = .55$), preemptive benefit-finding (4 items; e.g., “I have been trying to focus on good things that might come from the [other party] [gaining/maintaining] control of the U.S. House of Representatives after the U.S. midterm elections”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.67$, $SD = 1.44$, $\alpha = .86$), distraction (“I’ve been trying to distract myself from thinking about the outcome of the U.S. midterm election”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.25$, $SD = 1.55$), and suppression (two items; e.g., “I’ve been trying to stop myself from thinking about the outcome of the U.S. midterm election”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.91$, $SD = 1.59$, $r = .65$).

Study 8

Participants ($N = 137$; 68% women; $M_{\text{Age}} = 20.5$ years, $SD_{\text{Age}} = 2.67$ years; 17% White, 40% Asian or Pacific Islander, 36% Latinx, 2% Black or African-American, 5% other or multiple) were undergraduate students enrolled in a psychology class at the University of California, Riverside and volunteered for the study in exchange for course credit. All participants in the course were invited to participate, so sample size was determined by a combination of class size and student interest. After completing baseline assessment prior to their first course exam, participants completed questionnaires at four time points throughout the 5-day waiting period before learning their result, and once after learning their result. For the purpose of this article, we will focus on the four questionnaires completed during the waiting period. Full study materials are available at osf.io/fuh5t.

The waiting period questionnaires included measures of worry (three items; e.g., “I am worried about my grade on the Psych 1 midterm exam”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.56$, $SD = .80$, average $\alpha = .81$), preventive action (“How much effort have you put toward trying to minimize the problems that would occur if you do poorly on the Psych 1 midterm exam?”; 1 = *very little effort*, 5 = *a great deal of effort*; $M = .67$, $SD = 1.18$), proactive coping (“How much time did you spend thinking about how you’ll cope if you do poorly on the Psych 1 midterm exam?”; $M = .58$, $SD = .93$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to my Psych 1 midterm grade”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.79$, $SD = 1.06$, average $r = .70$), hope and optimism (two items; e.g., “I’m trying to be optimistic about my Psych 1 midterm grade”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 3.97$, $SD = .66$, average $r = .47$), preemptive benefit-finding (three items; e.g., “I feel like I would grow as a person if I do poorly on the Psych 1 midterm”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.03$, $SD = .86$, average $\alpha = .81$), distancing (five items; e.g., “The midterm didn’t really measure anything important”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 3.11$, $SD = .78$, average $\alpha = .79$), distraction (“I’ve been trying to distract myself from thinking about my Psych 1 midterm”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.08$, $SD = .85$), and suppression (two items; e.g., “I’ve been trying to stop myself from thinking about my Psych 1 midterm”; 1 = *strongly disagree*, 5 = *strongly agree*; $M = 2.10$, $SD = .92$, average $r = .79$).

Study 9

Participants ($N = 66$; 76% women; $M_{\text{Age}} = 20.9$; 13% White, 30% Asian or Pacific Islander, 48% Latinx, 4% Black or African-American, 5% other or multiple) were undergraduate psychology students enrolled in a research methods class at the University of California, Riverside and volunteered for the study in exchange for course credit. All participants in the

course were invited to participate, so sample size was determined by a combination of class size and student interest. Participants completed a baseline assessment prior to turning a major paper for the course, two questionnaires while waiting for their paper score (approximately 2 weeks), and one questionnaire after learning their score. Participants were also randomly assigned to a manipulation not relevant to this investigation. For the purpose of this article, we will focus on the two questionnaires completed during the waiting period. Full study materials are available at osf.io/gswm5.

The waiting period questionnaires included measures of worry (three items; e.g., “I am worried about my grade on the paper”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.80$, $SD = 1.68$, average $\alpha = .88$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to my grade on the paper”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.15$, $SD = 1.84$, average $r = .65$), hope and optimism (two items; e.g., “I’m trying to be optimistic about my grade on the paper”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 6.04$, $SD = .88$, average $r = .59$), preemptive benefit-finding (three items; e.g., “I feel like I would grow as a person if I do poorly on this paper”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.79$, $SD = 1.13$, average $\alpha = .65$), and distancing (five items; e.g., “The grade on this paper didn’t really reflect anything important”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.55$, $SD = 1.08$, average $\alpha = .71$).

Study 10

Participants ($N = 129$; 52% women; $M_{\text{Age}} = 33.9$; 84% White, 10% Asian or Pacific Islander, 4% Latinx, 1% Black or African-American, 1% Native American) were researchers from various disciplines recruited via professional organizations’ listservs. Sample size was determined by the number of people who participated within 1 month of posting study announcements. Participants completed a single questionnaire pertaining to their experiences as

they awaited the decision on a manuscript submitted for publication. Full study materials are available at osf.io/g6xbc.

The questionnaire included measures of worry (three items; e.g., “I am worried about my manuscript submission”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.30$, $SD = .94$, Cronbach’s $\alpha = .77$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to manuscript submission”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.14$, $SD = 1.07$, $r = .46$), hope and optimism (two items; e.g., “I’m trying to be optimistic about my manuscript submission”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.09$, $SD = .73$, $r = .52$), preemptive benefit-finding (three items; e.g., “I feel like I would grow as a person if I my manuscript is rejected, without option to resubmit, from this journal”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.01$, $SD = .80$, $\alpha = .65$), distraction (“I’ve been trying to distract myself from thinking about my manuscript submission”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.33$, $SD = 1.19$), and suppression (two items; e.g., “I’ve been trying to stop myself from thinking about my manuscript submission”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.05$, $SD = .96$, $r = .67$).

Study 11

Participants ($N = 89$; 64% women; $M_{\text{Age}} = 19.3$; 13% White, 30% Asian or Pacific Islander, 48% Latinx, 4% Black or African-American, 5% other or multiple) were undergraduate students recruited from the psychology subject pool at the University of California, Riverside. We aimed for 100 participants (50 in each experimental condition) but ultimately terminated data collection at the end of one academic quarter due to impending dissertation deadlines for the lead researcher. After completing informed consent procedures, participants responded to a baseline questionnaire, completed an intelligence test consisting of 10 Raven’s matrices, and were

randomly assigned to one of two conditions. In the no-feedback condition, the researcher indicated that due to lengthy scoring procedures, participants would not receive their test results. In the imminent-feedback condition, the researcher indicated that participants would receive their results by the end of the study. All participants then completed a final questionnaire before being fully debriefed. Full study materials are available at osf.io/2us6g.

The final questionnaire included measures of worry (three items; e.g., “I am worried about my test performance”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.81$, $SD = 1.71$, $\alpha = .90$), proactive coping (“How much time did you spend thinking about how you'll cope if your score is low?”; 1 = *not at all*, 5 = *a great deal of time*; $M = 1.77$, $SD = 1.20$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to my results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.66$, $SD = 1.80$, $r = .73$), hope and optimism (two items; e.g., “I’m trying to be optimistic about my results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.62$, $SD = 1.42$, $r = .62$), preemptive benefit-finding (four items; e.g., “I feel like I would grow as a person if my score is low”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.15$, $SD = 1.31$, $\alpha = .84$), distancing (five items; e.g., “This test doesn’t really measure anything important”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.84$, $SD = .77$, $\alpha = .42$), distraction (“I’ve been trying to distract myself from thinking about my results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.36$, $SD = 1.55$), and suppression (three items; e.g., “I’ve been trying to stop myself from thinking about my results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.40$, $SD = 1.47$, $r = .80$).

Study 12

Participants ($N = 330$; 67% women; $M_{\text{Age}} = 19.8$; 15% White, 40% Asian or Pacific Islander, 37% Latinx, 3% Black or African-American, 5% other or multiple) were undergraduate

students recruited from the psychology subject pool at the University of California, Riverside. We aimed to recruit 300 participants (50 in each cell of a 2x3 design) but ultimately extended data collection through the end of the relevant academic quarter. Procedures were identical to those in Study 11 except that participants were randomly assigned to an additional manipulation not relevant to this investigation. All participants then completed a final questionnaire before being fully debriefed. Full study materials are available at osf.io/mhqbw.

The final questionnaire included measures of worry (three items; e.g., “I am worried about my test performance”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.01$, $SD = 1.38$, $\alpha = .85$), proactive coping (“How much time did you spend thinking about how you'll cope if your score is low?”; 1 = *not at all*, 5 = *a great deal of time*; $M = 1.91$, $SD = 1.43$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to my results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.66$, $SD = 1.58$, $r = .63$), hope and optimism (two items; e.g., “I’m trying to be optimistic about my results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.85$, $SD = 1.26$, $r = .54$), preemptive benefit-finding (four items; e.g., “I feel like I would grow as a person if my score is low”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.24$, $SD = 1.18$, $\alpha = .77$), distancing (five items; e.g., “This test doesn’t really measure anything important”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.31$, $SD = .87$, $\alpha = .37$), distraction (“I’ve been trying to distract myself from thinking about my results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.36$, $SD = 1.55$), and suppression (three items; e.g., “I’ve been trying to stop myself from thinking about my results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.40$, $SD = 1.47$, $r = .80$).

Study 13

Participants ($N = 212$; 58% women; $M_{\text{Age}} = 19.32$ years, $SD_{\text{Age}} = 1.42$ years; 10% White, 54% Asian or Pacific Islander, 33% Latinx, 4% Black or African-American, 8% other or multiple) were undergraduate students recruited from the psychology subject pool at the University of California, Riverside. We aimed to recruit 200 participants (50 in each cell of a 2x2 design) but ultimately extended data collection through the end of the relevant academic quarter. Procedures were identical to those in Study 11 except that participants were randomly assigned to an additional manipulation not relevant to this investigation. All participants then completed a final questionnaire before being fully debriefed. Full study materials are available at osf.io/fusqm.

The final questionnaire included measures of worry (three items; e.g., “I am worried about my test results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.43$, $SD = 1.67$, $\alpha = .84$) and bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to my test results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.62$, $SD = 1.99$, $r = .65$).

Study 14

Participants ($N = 399$; 66% women; $M_{\text{Age}} = 19.0$; 10% White, 41% Asian or Pacific Islander, 41% Latinx, 3% Black or African-American, <1% Native American, 4% other or multiple) were undergraduate students recruited from the psychology subject pool at the University of California, Riverside. We aimed to recruit 300 participants (50 in each cell of a 2x3 design) but ultimately extended data collection through the end of the relevant academic quarter. After completing informed consent procedures, participants responded to a baseline questionnaire, and participated in a group interaction. After the interaction, members of the group proceeded to rate each other on interpersonal characteristics (e.g., likeable, trustworthy, interesting) and were randomly assigned to one of two conditions. In the no-feedback condition,

the researcher indicated that participants would not receive their interaction ratings made by the other group members. In the imminent-feedback condition, the researcher indicated that participants would receive their ratings by the end of the study. Participants were also randomly assigned to an additional manipulation not relevant to this investigation. All participants then completed a final questionnaire before being fully debriefed. Full study materials are available at osf.io/r3umq.

The final questionnaire included measures of worry (three items; e.g., “I am worried about how others saw me in the group interaction”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.72$, $SD = 1.53$, $\alpha = .91$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to my results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.29$, $SD = 1.64$, $r = .69$), hope and optimism (two items; e.g., “I’m trying to be optimistic about my results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.23$, $SD = 1.52$, $r = .60$), preemptive benefit-finding (four items; e.g., “I feel like I would grow as a person if my ratings are low”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.65$, $SD = 1.24$, $\alpha = .79$), distancing (five items; e.g., “This interaction doesn’t really indicate anything important”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.07$, $SD = .85$, $\alpha = .18$), distraction (“I’ve been trying to distract myself from thinking about my results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.36$, $SD = 1.59$), and suppression (three items; e.g., “I’ve been trying to stop myself from thinking about my results”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.55$, $SD = 1.51$, $\alpha = .93$).

Study 15

Participants and Method

Participants ($N = 216$; 56% women; $M_{\text{Age}} = 19.77$ years, $SD_{\text{Age}} = 2.12$ years; 12% White, 53% Asian or Pacific Islander, 29% Latinx, 6% Black or African-American, 13% other or

multiple) were undergraduate students recruited from the psychology subject pool at the University of California, Riverside. We aimed to recruit 200 participants (50 in each cell of a 2x2 design) but ultimately extended data collection through the end of the relevant academic quarter. After completing informed consent procedures, participants completed a baseline questionnaire and made a “confessional” style video recording in which they described personal experiences and values. The researcher provided each participant with a set of prompts and asked them to respond to the prompts while recording for five minutes. Participants believed that their video would be evaluated by graduate students on dimensions such as friendliness and intelligence, and were randomly assigned to one of two conditions. In the no-feedback condition, the researcher indicated that participants would not receive their video ratings. In the imminent-feedback condition, the researcher indicated that participants would receive their ratings by the end of the study. Participants were also randomly assigned to an additional manipulation not relevant to this investigation. All participants then completed a final questionnaire before being fully debriefed. Full study materials are available at osf.io/aybg5.

The final questionnaire included measures of worry (three items; e.g., “I am worried about the evaluation of my video”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.35$, $SD = 1.59$, $\alpha = .83$) and bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to the evaluation of my video”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.62$, $SD = 1.79$, $r = .68$).

Study 16

Participants and Method

Participants ($N = 318$; 68% women; $M_{\text{Age}} = 19.6$; 15% White, 35% Asian or Pacific Islander, 42% Latinx, 3% Black or African-American, 5% other or multiple) were undergraduate

students recruited from the psychology subject pool at the University of California, Riverside. We aimed to recruit 300 participants (50 in each cell of a 2x3 design) but ultimately extended data collection through the end of the relevant academic quarter.

After completing informed consent procedures, participants were informed that five other participants located in other labs on campus but would be part of the same study session. The researcher took a photo of each participant then ostensibly uploaded the photos on a website that would provide access to the other participants in the session. Participants completed a baseline questionnaire, then the researcher returned to access the website with the photos of the other participants in the same session. In reality, no other participants were in the study session. The researcher asked each participant to rate the website photos on several dimensions such as physical attractiveness and quality as a conversation partner (e.g., 1 = *very unattractive*, 5 = *very attractive*). Participants were then randomly assigned to one of two conditions. In the no-feedback condition, the researcher indicated that participants would not receive the ratings that the other participants made of their photo. In the imminent-feedback condition, the researcher indicated that participants would receive their ratings by the end of the study. Participants were also randomly assigned to an additional manipulation not relevant to this investigation. All participants then completed a final questionnaire before being fully debriefed. Full study materials are available at osf.io/fgzev.

The final questionnaire included measures of worry (four items; e.g., “I am worried about my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.53$, $SD = 1.66$, $\alpha = .89$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.66$, $SD = 1.55$, $r = .66$), hope and optimism (two items; e.g., “I’m trying to be optimistic about my photo ratings”; 1 = *strongly*

disagree, 7 = *strongly agree*; $M = 4.33$, $SD = 1.27$, $r = .52$), preemptive benefit-finding (four items; e.g., “I feel like I would grow as a person if my photo ratings are bad”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.68$, $SD = .96$, $\alpha = .81$), distancing (five items; e.g., “I feel like I look better in person than I did in my photo”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.85$, $SD = .49$, $\alpha = .39$), distraction (“I’ve been trying to distract myself from thinking about my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.24$, $SD = 1.19$), and suppression (two items; e.g., “I’ve been trying to stop myself from thinking about my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 2.24$, $SD = 1.13$, $r = .78$).

Study 17

Participants and Method

Participants ($N = 140$; 59% women; $M_{\text{Age}} = 19.18$ years, $SD_{\text{Age}} = 1.17$ years; 11% White, 42% Asian or Pacific Islander, 35% Latinx, 6% Black or African-American, 7% other or multiple) were undergraduate students recruited from the psychology subject pool at the University of California, Riverside. We aimed to recruit 200 participants (50 in each cell of a 2x2 design) but ultimately terminated data collection at the end of the relevant academic quarter. Procedures were identical to those in Study 16 except that participants were randomly assigned to a different additional manipulation not relevant to this investigation. Full study materials are available at osf.io/srv4t.

The final questionnaire included measures of worry (three items; e.g., “I am worried about my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.38$, $SD = 1.68$, $\alpha = .84$) and bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.08$, $SD = 1.85$, $r = .72$).

Study 18

Participants and Method

Participants ($N = 230$; 65% women; $M_{\text{Age}} = 19.25$ years, $SD_{\text{Age}} = 1.42$ years; 12% White, 47% Asian or Pacific Islander, 34% Latinx, 4% Black or African-American, <1% Native American, 3% other or multiple) were undergraduate students recruited from the psychology subject pool at the University of California, Riverside. Data collection proceeded for two academic quarters, producing a large sample for a 2-condition design. Procedures were identical to those in Study 16 except that participants were not assigned to an additional manipulation. Full study materials are available at osf.io/n862m.

The final questionnaire included measures of worry (three items; e.g., “I am worried about my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.69$, $SD = 1.73$, $\alpha = .89$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.21$, $SD = 1.79$, $r = .72$), and hope and optimism (two items; e.g., “I’m trying to be optimistic about my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.47$, $SD = 1.26$, $r = .65$).

Study 19

Participants and Method

Participants ($N = 196$; 60% women; $M_{\text{Age}} = 19.21$ years, $SD_{\text{Age}} = 1.73$ years; 7% White, 49% Asian or Pacific Islander, 40% Latinx, 2% Black or African-American, 2% other or multiple) were undergraduate students recruited from the psychology subject pool at the University of California, Riverside. We aimed to recruit 200 participants (50 in each cell of a 2x2 design) but ultimately terminated data collection at the end of the relevant academic quarter. Procedures were identical to those in Study 16 except that participants were randomly assigned

to a different additional manipulation not relevant to this investigation. Full study materials are available at osf.io/4bwt6.

The final questionnaire included measures of worry (three items; e.g., “I am worried about my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.57$, $SD = 1.61$, $\alpha = .86$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.19$, $SD = 1.71$, $r = .60$), and hope and optimism (two items; e.g., “I’m trying to be optimistic about my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.36$, $SD = 1.30$, $r = .70$).

Study 20

Participants and Method

Participants ($N = 579$; 65% women; $M_{\text{Age}} = 19.21$ years, $SD_{\text{Age}} = 1.67$ years; 11% White, 39% Asian or Pacific Islander, 35% Latinx, 4% Black or African-American, 10% other or multiple) were undergraduate students recruited from the psychology subject pool at the University of California, Riverside. We aimed to recruit 600 participants (100 in each cell of a 2x3 design) but ultimately terminated data collection at the end of the relevant academic quarter. Procedures were identical to those in Study 16 except that participants were randomly assigned to two different manipulations not relevant to this investigation. Full study materials are available at osf.io/8v5bg/.

The final questionnaire included measures of worry (three items; e.g., “I am worried about my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.57$, $SD = 1.66$, $\alpha = .89$), bracing for the worst (two items; e.g., “I am bracing for the worst when it comes to my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 4.47$, $SD = 1.49$, $r = .64$), hope and optimism (two items; e.g., “I’m trying to be optimistic about my photo ratings”; 1 = *strongly*

disagree, 7 = *strongly agree*; $M = 4.69$, $SD = 1.15$, $r = .58$), preemptive benefit-finding (four items; e.g., “I feel like I would grow as a person if my photo ratings are bad”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.93$, $SD = 1.23$, $\alpha = .81$), distancing (five items; e.g., “I feel like I look better in person than I did in my photo”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 5.09$, $SD = 0.74$, $\alpha = .49$), distraction (“I’ve been trying to distract myself from thinking about my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.05$, $SD = 1.46$), and suppression (two items; e.g., “I’ve been trying to stop myself from thinking about my photo ratings”; 1 = *strongly disagree*, 7 = *strongly agree*; $M = 3.03$, $SD = 1.44$, $r = .72$).

SUPPLEMENTAL TABLES

Table 1s

Correlations between Worry and Use of Coping Strategies—Field Studies

		Bracing	Hope/optimism	Distraction	Suppression	Preemptive	Distancing	Proactive	Preventive
	<i>n</i>	<i>r</i> (<i>p</i>)	<i>r</i> (<i>p</i>)	efforts <i>r</i> (<i>p</i>)	efforts <i>r</i> (<i>p</i>)	benefit-finding <i>r</i> (<i>p</i>)	<i>r</i> (<i>p</i>)	coping <i>r</i> (<i>p</i>)	action <i>r</i> (<i>p</i>)
Study 1	50	.65 ($<.0001$)	-.13 (.35)	.81 ($<.0001$)	--	-.03 (.86)	.01 (.95)	--	--
Study 2	214	.49 ($<.0001$)	-.05 (.46)	.77 ($<.0001$)	.78 ($<.0001$)	-.09 (.18)	.21 (.002)	.46 ($<.0001$)	.30 ($<.0001$)
Study 3	90	.48 ($<.0001$)	-.32 (.002)	.74 ($<.0001$)	.79 ($<.0001$)	-.04 (.74)	.11 (.30)	.50 ($<.0001$)	.31 (.003)
Study 4	132	.48 ($<.0001$)	-.09 (.33)	.49 ($<.0001$)	.58 ($<.0001$)	-.12 (.16)	.34 ($<.0001$)	-.67 ($<.0001$)	-.36 ($<.0001$)
Study 5	148	.21 (.01)	-.02 (.78)	.20 (.01)	.19 (.02)	-.22 (.008)	-.06 (.48)	-.25 (.003)	.007 (.93)
Study 6	669	.39 ($<.0001$)	.04 (.35)	.41 ($<.0001$)	.40 ($<.0001$)	-.01 (.72)	--	.41 ($<.0001$)	.15 (.0001)
Study 7	374	.36 ($<.0001$)	.08 (.14)	.37 ($<.0001$)	.41 ($<.0001$)	.11 (.04)	--	.36 ($<.0001$)	.46 ($<.0001$)
Study 8	137	.44 ($<.0001$)	-.005 (.95)	.80 ($<.0001$)	.79 ($<.0001$)	.15 (.08)	.12 (.14)	.49 ($<.0001$)	.27 (.002)
Study 9	66	.57 ($<.0001$)	-.09 (.47)	--	--	.02 (.90)	.08 (.49)	--	--
Study 10	129	.41 ($<.0001$)	-.14 (.11)	.52 ($<.0001$)	.45 ($<.0001$)	.03 (.73)	--	--	--

Not.: Correlation coefficients for associations between worry and each coping strategy.

Table 2s

Correlations between Worry and Use of Coping Strategies—Lab Studies

		Bracing	Hope/optimism	Distraction efforts	Suppression efforts	Preemptive benefit-finding	Distancing	Proactive coping	Preventive action
	<i>n</i>	<i>r</i> (<i>p</i>)	<i>r</i> (<i>p</i>)	<i>r</i> (<i>p</i>)	<i>r</i> (<i>p</i>)	<i>r</i> (<i>p</i>)	<i>r</i> (<i>p</i>)	<i>r</i> (<i>p</i>)	<i>r</i> (<i>p</i>)
Study 11	89	.55 ($<.0001$)	.25 (.02)	.51 ($<.0001$)	.65 ($<.0001$)	.28 (.009)	.17 (.12)	.49 ($<.0001$)	--
Study 12	330	.46 ($<.0001$)	.12 (.03)	.56 ($<.0001$)	.65 ($<.0001$)	.24 ($<.0001$)	.02 (.73)	.34 ($<.0001$)	--
Study 13	212	.57 ($<.0001$)	--	--	--	--	--	--	--
Study 14	399	.53 ($<.0001$)	.25 ($<.0001$)	.57 ($<.0001$)	.66 ($<.0001$)	.23 ($<.0001$)	.05 (.30)	.46 (.0004)	--
Study 15	214	.68 ($<.0001$)	--	--	--	--	--	--	--
Study 16	318	.54 ($<.0001$)	.29 ($<.0001$)	.61 ($<.0001$)	.64 ($<.0001$)	.22 ($<.0001$)	.15 (.009)	--	--
Study 17	140	.62 ($<.0001$)	--	--	--	--	--	--	--
Study 18	229	.67 ($<.0001$)	.19 (.004)	--	--	--	--	--	--
Study 19	196	.62 ($<.0001$)	.16 (.02)	--	--	--	--	--	--
Study 20	579	.52 ($<.0001$)	.23 ($<.0001$)	.50 ($<.0001$)	.60 ($<.0001$)	.15 (.0003)	.19 ($<.0001$)	.65 ($<.0001$)	--

Note: Correlation coefficients for associations between worry and each coping strategy, with *p*-values below each in parentheses.

Table 3s

Main Effects from Multiple Regression Analyses Predicting Coping from Gender and Worry: Field Studies

	Bracing		Hope/optimism		Distraction efforts		Suppression efforts		Preemptive benefit-finding		Distancing		Proactive coping		Preventive action	
	Gender	Worry	Gender	Worry	Gender	Worry	Gender	Worry	Gender	Worry	Gender	Worry	Gender	Worry	Gender	Worry
	β [95% CI]	β [95% CI]	β [95% CI]	β [95% CI]	β [95% CI]	β [95% CI]	β [95% CI]	β [95% CI]	β [95% CI]	β [95% CI]	β [95% CI]	β [95% CI]	β [95% CI]	β [95% CI]	β [95% CI]	β [95% CI]
Study 1	-.14 [-.37, .08]	.67 [.45, .90]	.15 [-.15, .46]	-.17 [-.48, .14]	.15 [-.03, .33]	.76 [.58, .94]	--	--	.08 [-.23, .39]	-.03 [-.35, .28]	.17 [-.14, .48]	-.06 [-.37, .25]	--	--	--	--
Study 2	.07 [-.05, .20]	.50 [.37, .63]	-.01 [-.15, .13]	-.01 [-.15, .13]	.08 [-.01, .17]	.76 [.67, .86]	.06 [-.03, .15]	.77 [.68, .87]	.03 [-.11, .17]	-.02 [-.17, .12]	.03 [-.11, .18]	.17 [.03, .32]	.10 [-.03, .23]	.46 [.32, .59]	.07 [-.07, .21]	.29 [.14, .43]
Study 3	-.03 [-.23, .16]	.47 [.28, .67]	-.01 [-.22, .20]	-.30 [-.51, -.09]	.04 [-.11, .19]	.72 [.57, .87]	.06 [-.07, .20]	.77 [.63, .90]	.09 [-.13, .31]	-.08 [-.31, .14]	.13 [-.09, .35]	.09 [-.13, .31]	-.01 [-.21, .18]	.50 [.31, .69]	.06 [-.15, .27]	.30 [.09, .51]
Study 4	.15 [-.02, .31]	.45 [.28, .61]	.005 [-.18, .19]	-.08 [-.28, .11]	.09 [-.07, .25]	.48 [.32, .64]	.11 [-.04, .26]	.56 [.41, .71]	.03 [-.15, .21]	-.10 [-.28, .08]	.08 [-.09, .24]	.34 [.17, .52]	.005 [-.13, .14]	-.68 [-.81, -.54]	-.13 [-.30, .04]	-.33 [-.50, -.15]
Study 5	-.06 [-.23, .11]	.21 [.03, .39]	-.08 [-.25, .09]	.01 [-.17, .20]	-.04 [-.21, .13]	.24 [.06, .42]	-.05 [-.21, .12]	.16 [-.02, .34]	-.20 [-.37, -.04]	-.22 [-.40, -.04]	-.10 [-.27, .07]	-.03 [-.21, .16]	.16 [-.01, .32]	-.23 [-.40, -.05]	.19 [.02, .35]	.05 [-.12, .23]
Study 6	-.12 [-.19, -.05]	.40 [.33, .47]	.13 [.05, .21]	.02 [-.06, .10]	-.04 [-.11, .03]	.41 [.34, .48]	-.06 [-.14, .01]	.41 [.34, .48]	-.02 [-.10, .05]	-.01 [-.09, .07]	--	--	.005 [-.07, .07]	.42 [.35, .49]	-.08 [-.16, -.01]	.16 [.08, .24]
Study 7	-.09 [-.18, .01]	.35 [.26, .45]	.08 [-.02, .18]	.08 [-.02, .19]	-.07 [-.17, .02]	.35 [.26, .45]	-.10 [-.20, -.01]	.39 [.30, .49]	-.06 [-.16, .04]	.09 [-.01, .19]	--	--	-.05 [-.14, .04]	.46 [.37, .55]	-.13 [-.23, -.04]	.36 [.26, .45]
Study 8	.09 [-.07, .25]	.47 [.31, .64]	-.07 [-.11, .26]	-.07 [-.27, .12]	.01 [-.10, .12]	.78 [.66, .90]	.03 [-.09, .14]	.77 [.65, .88]	.02 [-.16, .20]	.21 [.02, .39]	-.13 [-.32, .05]	.19 [.003, .38]	-.17 [-.33, -.01]	.58 [.41, .75]	-.03 [-.21, .15]	.31 [.13, .50]
Study 9	.14 [-.07, .35]	.55 [.34, .76]	-.25 [-.50, .01]	-.04 [-.30, .21]	--	--	--	--	-.09 [-.35, .16]	.10 [-.15, .36]	-.03 [-.29, .23]	.10 [-.16, .36]	--	--	--	--
Study 10	.11 [-.05, .27]	.41 [.25, .57]	-.01 [-.19, .16]	-.13 [-.31, .05]	-.03 [-.18, .13]	.51 [.36, .67]	.03 [-.13, .19]	.43 [.27, .59]	.06 [-.12, .24]	.01 [-.17, .19]	--	--	--	--	--	--

Note: Estimates are standardized betas from multiple regression analyses predicting each coping strategy from worry (centered), gender (male = -0.5, female = +0.5), and their interaction. Main effects presented here; see Tables 5–7 for interaction effects.

Table 4s

Main Effects from Multiple Regression Analyses Predicting Coping from Gender and Worry: Lab Studies

	Bracing		Hope/optimism		Distraction efforts		Suppression efforts		Preemptive benefit-finding		Distancing		Proactive coping		Preventive action	
	Gender	Worry	Gender	Worry	Gender	Worry	Gender	Worry	Gender	Worry	Gender	Worry	Gender	Worry	Gender	Worry
	β	β	β	β	β	β	β	β	β	β	β	β	β	β	β	β
	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]	[95% CI]
Study 11	.20 [.03, .38]	.52 [.34, .70]	.39 [.19, .58]	.22 [.02, .41]	.28 [.10, .45]	.45 [.28, .63]	.19 [.03, .35]	.60 [.44, .76]	.10 [-.11, .31]	.26 [.05, .47]	-.02 [-.23, .19]	.23 [.02, .44]	.09 [-.10, .28]	.46 [.26, .65]		--
Study 12	.09 [-.01, .20]	.46 [.36, .56]	.16 [.04, .27]	.12 [-.004, .24]	.04 [-.05, .14]	.55 [.45, .65]	.04 [-.05, .13]	.63 [.54, .72]	.12 [.01, .23]	.23 [.11, .34]	.07 [-.04, .19]	-.01 [-.13, .11]	-.05 [-.21, .11]	.30 [.14, .45]		--
Study 13	.13 [.02, .24]	.56 [.45, .68]	--	--	--	--	--	--	--	--	--	--	--	--		--
Study 14	.06 [-.08, .09]	.56 [.47, .65]	.05 [-.04, .15]	.28 [.17, .38]	.03 [-.05, .12]	.54 [.46, .63]	.01 [-.06, .09]	.65 [.57, .73]	.08 [-.02, .17]	.23 [.13, .33]	-.004 [-.10, .10]	.04 [-.06, .15]	-.08 [-.36, .20]	.35 [.10, .60]		--
Study 15	.0001 [-.10, .10]	.69 [.59, .79]	--	--	--	--	--	--	--	--	--	--	--	--		--
Study 16	-.01 [-.11, .09]	.58 [.47, .69]	.02 [-.09, .13]	.30 [.18, .42]	.02 [-.07, .11]	.62 [.52, .72]	-.01 [-.10, .08]	.66 [.56, .75]	-.006 [-.12, .11]	.22 [.09, .34]	.10 [-.01, .22]	.14 [.01, .26]	--	--		--
Study 17	.05 [-.09, .18]	.62 [.48, .76]	--	--	--	--	--	--	--	--	--	--	--	--		--
Study 18	.14 [.04, .24]	.67 [.56, .78]	-.01 [-.15, .12]	.21 [.06, .36]	--	--	--	--	--	--	--	--	--	--		--
Study 19	.11 [-.003, .22]	.61 [.48, .73]	-.13 [-.27, .01]	.19 [.03, .34]	--	--	--	--	--	--	--	--	--	--		--
Study 20	.07 [-.01, .14]	.50 [.43, .58]	-.13 [-.21, -.05]	.26 [.17, .34]	-.02 [-.09, .05]	.51 [.43, .59]	-.003 [-.07, .06]	.59 [.52, .66]	-.03 [-.11, .06]	.17 [.08, .26]	.09 [.01, .17]	.16 [.07, .24]	.09 [.03, .16]	.58 [.52, .65]		--

Note: Estimates are standardized betas from multiple regression analyses predicting each coping strategy from worry (centered), gender (male = -0.5, female = +0.5), and their interaction. Main effects presented here; see Tables 5-7 for interaction effects.